

# EXHIBIT C

## Package Details

Welcome, Vanessa Billups

### Events

#### Requested



Wednesday  
11/25/2009  
2:27 PM

#### Carrier Delivered



Tuesday  
12/1/2009  
8:45 AM

### Details

<b>Site</b>	WS	<b>City</b>	Dublin
<b>DEMS ID</b>	Z900000001116	<b>State</b>	OH
<b>Ship To 1</b>	The Garden City Goup Inc.	<b>ZIP</b>	43017
<b>Ship To 2</b>	Attn: Motors Liquidation Companys Claims	<b>Country</b>	US
<b>Address 1</b>	5151 Blazer Parkway, Suite A	<b>Weight</b>	5.106
<b>Address 2</b>		<b>Manifest Date</b>	
<b>Address 3</b>		<b>Carrier</b>	FEDX
<b>Service</b>	NAM	<b>Tracking No.</b>	
<b>Sender First Name</b>	Vanessa	<b>Sender Last Name</b>	Billups

Events		Contents					
Status	Date	Time	Clerk	Location	Site	Notes/Reference	Signature
REQUESTED	11/25/2009 12:00:00 AM	2:27 PM	vbillups		WS		
CARR DELIV	12/1/2009 12:00:00 AM	8:45 AM			WS		

[Back](#)

## Shipment Request Form



WOLFF - SAMSON



Z900000001116

## From:

Name: Vanessa Billups

Phone:

Client Matter Number 081220014

Lawyer Number 0420

## Special Instructions:

## To:

Ship To 1: The Garden City Goup Inc.

Ship To 2: Attn: Motors Liquidation Companys Claims

Address: 5151 Blazer Parkway, Suite A

Dublin, OH 43017

Country: US

ECertified False

E Return False

Requested Date: 11/25/2009 2:27:29 PM

## To print this form:

- 1) Click the Print button. (Print two copies, one to attach to your package and one to keep for your records.)
- 2) Place the form in a waybill pouch or attach it to your shipment so that the barcode portion of the page can be read and scanned.

Form (1 of 1)